



**Solvency and Financial  
Condition Report**

**2021**

Keeping life colourful

# Welcome from the Chair

Dear Members,

As the people responsible for your Society, the regulator requires us to report to you on the extent to which your benefits are secure in a document called the Solvency and Financial Condition Report ('SFCR'). I am delighted to present the SFCR for the year ended 31 December 2021.

Our job is to be there when you need us most. When you are too ill to work, we provide a replacement income. We manage the Society to provide these benefits in two ways. First, we make sure that the Society has a healthy financial position, now and in the future (called 'having sufficient capital'). Second, we make sure that we run the Society properly (called 'having effective governance'). This report describes the work we have done in 2021 to demonstrate that we have sufficient capital and effective governance, and so ensure the security of your benefits.

Running any business involves risk. There is always a risk that our finances deteriorate or that we fail to run the Society properly. We, the Board, are obliged to take every reasonable step to ensure that we identify and manage the risks that the Society faces.

The SFCR is organised into six sections. The sections and their contents are set by the regulator. We have added explanatory boxes throughout this year's report to explain any new terms as they are used and have summarised them in a glossary at the end. We have deliberately tried to avoid technical language but have sometimes had to strike a balance between the regulatory requirements and keeping things simple.

I hope you enjoy reading this report. We are always delighted to discuss the Society with our Members at the Annual General Meeting or at any other time. If you have any comments, questions or suggestions, please do not hesitate to contact me.

# Summary

## Business and Performance

2021 was another difficult year, dealing with the continuing effects of the pandemic. While sales have been modest, we have maintained our Member numbers overall and crucially for the future of the Society, we have implemented our new administration platform, PRISM.

We have paid out more in Member benefits than ever before.

We have gradually removed almost all of the restrictions on products that were introduced to protect the Membership at the start of the pandemic.

Our investments have generally preserved value. We have continued to use our investments to support new business and to pay for the development of PRISM.

Our strategy is to grow by providing useful plans to new and existing Members, and we are confident that the strategy remains appropriate.

Our business model describes how we will implement our strategy. Our view is that our best chance of success is to develop new products and features that Members and Advisers see as attractive and which are competitively priced. We

manage our underwriting and claims handling ourselves, because we have expertise in this work.

Given that we are a relatively small insurer, our business model includes buying in specialist services which we cannot carry out ourselves.

As a result of our strategy, business model and plans, we expect to grow the value of the Society for our Members.

## Risk Profile

All insurers manage risk. It is management's job to organise the firm's affairs to ensure that benefits can be reliably paid when an insured event happens and a claim is made.

The regulator wants to know that insurers understand the risks that they face. It has created a formula for insurers to use that calculates the cost of the risks being run based on the nature of the firm. If the firm has enough capital to cover the calculated cost, the benefits are estimated to be at least 99.5% certain of being paid over the year following the calculation. We think that this formula is the best way of measuring the Society's cost of risk from the methods available.

We have performed the necessary calculations using this formula. The results indicate that we have more than enough capital to ensure that Members' benefits will be paid over the next twelve months (which is the regulatory requirement). The Board is also satisfied that it will continue to be able to meet claims as they fall due in the future.

The formula identifies the source of the risks and calculates a cost for each of them. Using this formula in 2021, we have established that our biggest risks arise if plans lapse sooner than expected, if sickness worsens or if we spend too much. We know too from other work that it is important that our plans are priced to achieve a reasonable level of profit, that we do not sell too much guaranteed-rate business and that we sell enough overall to support our Head Office expenses.

We continually manage these risks, as well as all of the other risks that we face.

## Managing Our Risk Profile

Risk is managed by having sufficient capital and having an effective system of governance. We have sufficient capital and an effective system of governance. This report sets out how we have concluded that this is the case.

# Summary

## Having Sufficient Capital

Every year, we estimate the benefits that we expect to pay our Members and the assets that we have to meet them. We assume that most existing Members continue their policies, we make assumptions about expected sickness and we allow for a proportion of Members to stop their plans. This review is called the annual valuation.

The valuation proves that the Society has enough capital to meet Member benefits.

We calculate the risk in the Society's business using the formula mentioned earlier. The cost of risk is called the Solvency Capital Requirement or SCR. It is a measure of how much extra capital the Society needs to be 99.5% sure that it can meet all Member benefits in the next year. If an insurer has more capital than the SCR, the chance of there being a problem in the next twelve months is even lower than 0.5%. We have more capital than the SCR.

### The Society's Valuation

This year, our valuation showed a healthy buffer of assets over liabilities. This buffer is called, in regulatory jargon, 'Own Funds'.

The SCR is the capital needed to cover the cost of the risks calculated by the formula. While we followed the rules to calculate the SCR and we think the number is correct, the regulator reserves the right to disagree and may ask us to change it.

Surplus capital is regulatory jargon for the difference between Own Funds and the SCR. The surplus capital provides extra protection to Members and is available for other purposes, such as investment in the Society's strategy.

Table 1 shows that the Society has almost £32m of surplus capital when it has allowed for the cost of risk calculated by the regulator's formula:

Table 1: Surplus Capital, £000	31 Dec 2021	31 Dec 2020
(a) Own Funds	77,600	59,807
(b) Solvency Capital Requirement ('SCR')	45,758	41,983
(c) Surplus Capital (a) – (b)	31,842	17,824

Surplus capital has increased over 2021. This is caused by a number of changes, some which have increased and some which have reduced surplus. The main factor driving the increase is improvements to the sickness projection approach.

We expect our surplus capital to reduce over the next year as we invest more in new business and in developing the Society. This new business will mean that the SCR in 2022 will increase and the surplus capital will fall. The Board will continue to monitor the SCR and the surplus capital, to ensure that risk does not grow too high and that capital does not fall too much.

The regulator classifies capital into tiers, depending on how reliably it can be called upon when needed. All of the Society's capital is Tier 1. Tier 1 capital is the best quality capital (the most reliable).

The regulator sets a minimum level of capital called the Minimum Capital Requirement or MCR which, for the Society, is one quarter of the SCR. If an insurer's capital falls below the MCR, the regulator will intervene. We are a long way from our capital being below this level.

**In conclusion, we have more than enough capital to confidently support the payment of Member benefits over the next twelve months.**

# Summary

## An effective system of governance

The Society has an effective system of governance.

We have procedures in place to make sure that those working for the Society, especially at a senior level, are fit and proper. The risk management system has been reviewed this year and is effective.

Pay is properly managed.

The internal control system has similarly been reviewed and strengthened. The Society has effective compliance, actuarial, risk management and internal audit functions.

Our Independent Auditor is BDO LLP, unchanged from last year.

Our Internal Auditor is EY LLP, unchanged from last year.

During the year, we appointed Alison Carr FIA of Steve Dixon Associates llp as our Chief Actuary. Alison was approved in this role by the regulator on 18 November 2021. Our With-Profits Actuary is Sally Butters of OAC plc, unchanged from last year.

We have a robust process of assessing potential partner firms before we outsource any activity to them, and we continue to monitor those firms to whom we have outsourced services.

**In conclusion, we are satisfied that our system of governance is effective, given the nature, scale and complexity of the Society's risks.**

## The Impact Of Coronavirus

This report describes the Society in 2021, but there are parts of it that are forward looking, and we have noted the impact of coronavirus where appropriate. As with most businesses, coronavirus has introduced an unprecedented level of uncertainty into the Society's prospects. The Board has considered the possible impact and has concluded that the Society is able to continue to meet its obligations to Members and regulators. That said, the situation is fast moving and the Board is continuing to monitor the position as events unfold.

## Our Responsibility

The Directors are responsible for preparing this, the 2021 Solvency and Financial Condition Report, so that it meets the regulator's financial reporting rules and the rules that apply to insurance companies (called Solvency II regulations). The Directors are responsible for making sure that the working environment is robust enough to ensure that this report is accurate and free from any material mistakes, from any cause, including fraud or someone's error.

We are satisfied that, throughout 2021, the Society complied in all material respects with the requirements of the regulators' rules and the Solvency II regulations. It is reasonable to believe that the Society has continued to comply since and will continue to do so in future.



**By Order of the Board  
Stuart Tragheim  
Chief Executive & Director  
8 April 2022**

# Contents



Solvency and Financial  
Condition Report 2021

# A. Business and Performance

# A. Business and Performance

## A.1 Business

The Original Holloway Friendly Society Limited ('the Society') exists to provide a replacement income when you, one of our Members, cannot work because of illness or injury (which we call 'sickness'). We protect a proportion of your income when you cannot work and try to help you get back to work where we can.

In 2016, the Board took time to assess the future of the Society. The Board decided that it wanted to grow the Society and to provide our products to more people. This ambition required the Society to grow. To grow, we had to change how we worked. 2021 was the fifth year in a five-year plan to grow the Society by increasing the number of Members.

The pandemic gave rise to a significant amount of uncertainty, with potentially far-reaching impacts for many businesses. The results set out in this report represent the position as at 31 December 2021 as required by the regulations. It shows how we have responded to the second year of the pandemic and the implications of our response on our capital and governance.

## Products

In 2021, we offered four income protection (or 'IP') products. Each protects your income up to a pre-agreed amount. Each protects you until your chosen retirement date, provided you keep up the payments.

One of our products pays out for up to one or two years (called 'Short Term Income Protection') for any single cause. The others pay out until your chosen retirement date if you remain sick. Short Term Income Protection is cheaper because the benefit payment period is capped and it has different features, so it appeals to different people.

For our 'Purely Protection' and Short Term Income Protection products, the amounts that Members pay increase with age, according to a pre-agreed schedule. The cost of your protection increases, hopefully as your income increases.

The cost of 'one2protect' is a fixed amount per month which is guaranteed for five years from the start date. The cost may then vary, depending primarily on how sick, or not, Members with this product have been. Broadly, if claims paid are higher than expected, the cost to Members will increase. If the claims paid are lower, the cost to Members will reduce. There are other factors that might affect the cost, but sickness is the most important factor. The cost of one2protect, unlike our other products, differs depending on your job.

We offer a Holloway product. This pays you an income if you cannot work with an additional benefit of some savings and the right to share in the Society's profits. We call this our With-Profits (or 'WP') product.

### What is a Holloway product?

We understand that we were the first firm to combine income protection and savings. The resulting innovative product, introduced around 1875, was named after our founder, George Holloway, MP for Stroud.

We may, in the future, offer new products or adjust or stop offering existing products.

As you might realise, this is a simplified description. Our products are available only through appropriately qualified Financial Advisers who can explain them, including how they can be adjusted for your needs and what options are available. Advisers act for you, not for us, although we do pay commission to them for every new product which is bought. They can usually offer products from a range of providers, not just from us.

We manage a number of products, some of which are no longer available. These can be divided into three types: Income Protection, With-Profits or Unit Linked products.

# A. Business and Performance

The Unit Linked product is closed to new business. It was a savings product where the benefit was linked to investment performance.

Everyone who has a product issued by the Society becomes a Member.

The Society is owned by its Members. It has no shareholders. Therefore, everyone at the Society works for you, our Members. The Society's Board of Management ('Board') makes decisions on your behalf. You elect the Directors who serve on the Board.

The Society has Members throughout the UK, the Channel Islands and the Isle of Man. It offers its products throughout the UK and in the Isle of Man.

We are, legally speaking, a friendly society, registered and incorporated under the UK Friendly Societies Act 1992 with the registered number 145F. We are authorised and regulated by the Prudential Regulation Authority ('PRA') and regulated by the Financial Conduct Authority ('FCA'). Our Firm Reference Number is 109986, which you can use if you want to write to either regulator.

## What is a Board?

Most companies are run by a Board of Directors. These are the people who direct the company, decide its strategy and ensure its governance. The Board oversees plans, performance and activity and, if not satisfied, makes changes.

The Board is chosen by the owners of the company. For us, the Board is chosen by you, our Members at the annual general meeting.

The PRA is responsible for ensuring that we can pay benefits when they are needed. It is the regulator that requires this document to be produced and when we use the term 'regulator', we mean the PRA. You can contact the PRA by writing to Prudential Regulation Authority, 20 Moorgate, London, EC2R 6DA or by calling 0207 601 4878.

We are also regulated by the FCA, which is responsible for regulating our conduct. You can contact the FCA by writing to the Financial Conduct Authority, 12 Endeavour Square, London, E20 1JN or calling 0207 066 1000.

Our independent auditor is BDO LLP ('BDO'). BDO can be contacted by writing to 55 Baker St, Marylebone, London W1U 7EU or by telephoning 020 7486 5888.

The economic uncertainty arising from the pandemic continues to affect sales in the insurance market. The Society has considered this in its assessment of future prospects. It will continue to refine its assessments as the situation becomes clearer.

## What is an independent auditor?

An independent auditor is a firm appointed mainly to provide independent assurance to Members that a Society's accounts are broadly accurate.

# A. Business and Performance

## A.2 Underwriting Performance

### What is underwriting?

Underwriting is the insurance term for setting the prices to be paid for the benefits offered at the right level for the risks accepted. For us, this means agreeing prices for individual Members that are competitive as well as ensuring that we can meet the claims of all Members and cover the Society's administration costs.

Underwriting success can be judged by the difference between payments received, claims paid and the costs of administration. Underwriting is effective if the payments received are greater than the claims paid and administration expenses. We look first at payments received and claims. Table 2 shows payments and claims for the three products described earlier (Income Protection (IP), With-Profits (WP) or Unit Linked (UL)). Reinsurance is included and is explained a little later.

**Table 2: Underwriting Performance, £000**

	IP		WP		UL		Total	
	2021	2020	2021	2020	2021	2020	2021	2020
Gross Payments (P)	8,114	7,690	2,632	2,737	-	-	10,746	10,427
Reinsurance Out	-	-	(55)	(60)	-	-	(55)	(60)
<b>Net Earned Payment Income</b>								
Gross Claims	(2,941)	(2,868)	(548)	(557)	(42)	(50)	(3,531)	(3,475)
Reinsurance In	-	-	8	6	-	-	8	6
<b>Surplus (by how much does income exceed claims)</b>								
Surplus (S)	<b>5,173</b>	<b>4,822</b>	<b>2,037</b>	<b>2,126</b>	<b>(42)</b>	<b>(50)</b>	<b>7,168</b>	<b>6,898</b>
<b>% Surplus (S÷P)</b>	<b>63.7%</b>	<b>62.7%</b>	<b>77.4%</b>	<b>77.7%</b>	<b>-</b>	<b>-</b>	<b>66.7%</b>	<b>66.2%</b>

Key: IP = Income Protection, WP = With-Profits, UL = Unit Linked

The Surplus is the difference between income from Members and claim payments. The bigger the number, the more money the Society has to support Member benefits and the Society's growth. The 2021 surplus is slightly higher than in 2020, which is a positive sign.

Very little new With-Profits business was sold in 2021. The With-Profits results include Members claiming their investment balances. The Unit Linked plans are closed to new business and have all completed their payment-paying term.

Overall, a healthy underwriting surplus was generated for the Society. The surplus meets expenses, including strategic expenses or is retained as value for Members, current and future.

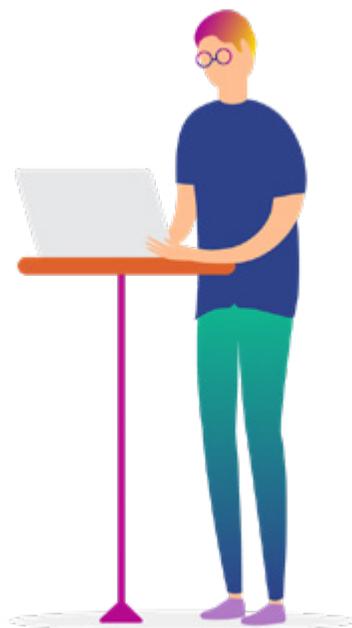
Our main source of income is payments from Members. We also receive income from our investments. Details of this income are in section A.3.

# A. Business and Performance

## What is reinsurance?

Reinsurance is insurance for insurance companies. An insurer can use reinsurance to reduce its own risk, to provide technical support and to help with cash flow.

Reinsurance is provided by specialist firms called reinsurers.



Having identified in Table 2 the difference between payments from Members and claims paid to Members, we consider the expenses. Table 3 shows the expenses.

Table 3: Operating Expenses, £000			
Expense Type		2021	2020
Acquisition	Commission	1,296	1,821
	Sales-related Expenses	4,764	4,759
<b>Total Acquisition Expenses</b>		<b>6,060</b>	<b>6,580</b>
Administrative	Maintenance Expenses	3,022	2,618
	One-off Expenses	53	61
<b>Total Administrative Expenses</b>		<b>3,075</b>	<b>2,679</b>
<b>Total Operating Expenses</b>		<b>9,135</b>	<b>9,259</b>

Commission is lower than in 2020, in line with the lower new business. Other expenses are higher reflecting the decision to maintain our infrastructure during the pandemic.

Reinsurance is not very important for the Society at the moment. Our reinsurance payments and recoveries are very small. It may become more important in future if we decide to offer new types of product or add reinsurance to our existing products.

# A. Business and Performance

## Underwriting & Claims in General

With more new Members, we have to underwrite more people. We have a dedicated team to do this work. We expect our underwriting standards to be maintained as we grow.

Managing claims is an important part of our work. We pride ourselves on working with Members to help them claim quickly and without fuss and helping them get back to work as soon as they can. We take steps to ensure that our Members' assets are not subject to fraud, so take care to ensure that claims are valid. We continue to develop our underwriting and claims management facilities.

## A.3 Investment Performance

The Society's investments are managed by a firm called LGT Vestra Wealth Management UK LLP. We classify our investments into three categories: equities (shares), fixed interest (UK gilts and bonds) and cash and property. Table 4 below shows how our investments have performed:

Return Type	Asset Type	Equities		Fixed Interest		Cash and Property		Total	
		2021	2020	2021	2020	2021	2020	2021	2020
Realised Capital (Loss)/Gain		17	(240)	(45)	(108)	-	-	(29)	(348)
Income Received		97	94	426	492	3	13	525	599
Unrealised Capital (Loss)/Gain		157	(202)	(536)	485	-	-	(378)	283
Investment Expenses		(9)	(9)	(62)	(72)	(9)	(7)	(79)	(88)
<b>TOTAL</b>		<b>262</b>	<b>(357)</b>	<b>(217)</b>	<b>797</b>	<b>(6)</b>	<b>6</b>	<b>39</b>	<b>446</b>

During the year, we made no significant changes to our investment profile.

At the end of the year, we held no securitised assets. The regulations say that we must let you know if we hold this type of investment.

The Society has a small portfolio of assets to support its Unit Linked plans, which is also managed by LGT Vestra.

# A. Business and Performance

## A.4 Performance of Other Activities

The Society did not perform any other activities.

## A.5 Any Other Information

There is nothing additional to report.



Solvency and Financial  
Condition Report 2021

# B. System of Governance

# B. System of Governance

## What is governance?

Governance covers everything done to be sure that a business is running properly. It includes legal requirements, the need to be fair to Members, and the need to organise the business sensibly and with due regard for risk.

## B.1 General Information on the system of governance

### What is a system of governance?

This means everything that is in place to make sure that the Society is well governed.

We have an effective system of governance in place. It ensures that we manage the Society safely and reliably. The system of governance reflects our size, the range of products that we offer and our historic expertise in the work that we do. The system of governance for a large company is different to that of a small one. It is important that the approach chosen fits the company. We think that ours does.

Regulation asks for three things in the system of governance: (a) a transparent organisational structure, (b) clear and appropriate segregation of responsibilities, and (c) a well-established and effective system for ensuring the transmission of information. We have these in place. In short, (a) all of our Colleagues know what their jobs are and who does what, (b) we insist that everyone's work is checked by someone else and that no-one is allowed to do work where there might be a conflict, and (c) we work hard to make sure that everyone knows what is going on, and if not, that it is clear where to go for help.

The system of governance is regularly reviewed by the Board and its Audit and Risk Committee.

### What is the Audit and Risk Committee?

The Board has set up Committees to help it with oversight. The Audit and Risk Committee oversees internal and independent audit, compliance, actuarial and risk management activities. It ensures that the risk management and internal control systems are effective.

## About the Board

The Board is a group of people, called Directors, who, together, run the Society at a high level. It is chosen by our Members and is responsible to them and to the regulators.

The Board is made up of Non-Executive and Executive Directors.

The Non-Executive Directors are independent. Primarily this means that they don't work in the Society other than as Directors, nor do they have any personal interest in the Society, other than owning one of the Society's products.

The Executive Directors work in the Society as well as being Directors. They too own products issued by the Society.

Directors are explicitly allowed to own products issued by the Society under the Society's rules. As everyone knows about this, it is not deemed to be a conflict.

There are more Non-Executive Directors on the Board than there are Executive Directors. If it comes to a vote, Executive Directors cannot out-vote the independent Non-Executive Directors.

# B. System of Governance

The Board was, as at 31 December 2021, made up of seven people: five Non-Executive Directors, the Chief Executive and the Chief Financial Officer (who is also the Chief Risk Officer). One Non-Executive Director resigned during 2021 and two new Non-Executive Directors were appointed early in 2022.

The Board decides the strategy, hires the Chief Executive and other senior people, and monitors performance. The Board can consider anything it chooses. Mainly, it considers business plans, culture, financial and other reporting, the quality of the system of governance, risk management, the prudential management of the Society and its own succession. The Board is led by the Chair. This year, the focus has been primarily on developing the next strategic plan and directing the Society as the pandemic recedes.

## What is the Chair?

The Chair is the Non-Executive Director who leads the Board. It is an important role with specific responsibilities to the regulator and to Members.

There are three Board Committees which help the Board do its work. These Committees and the Board hold the Executive to account.

## What (or who) is the Executive?

The Executive refers to a small group of senior employees. At the end of 2021, the Executive comprised the Chief Executive, the Sales & Marketing Director, the Director of Operations and the Chief Financial Officer.

These are the employees who run the Society, led by the Chief Executive, responsible to the Board.

The Nomination and Remuneration Committee is two committees sitting at the same time.

The Nomination Committee is, as at 31 December 2021, made up of four people: two independent Non-Executive Directors, the Chair and the Chief Executive. It considers the Board's performance and its current and future make up. The Remuneration Committee is made up of three people: two independent Non-Executive Directors and the Chair. It considers all aspects of pay, including Executive pay, and bonus plans (short-term, long-term and sales). This joint Committee meets at least twice a year. It helps the Board by making sure that the Board and its Committees work effectively, including having a plan for succession, and that there is effective oversight of pay and benefits. No Director is involved in setting their own pay.

The Investment Committee is, as at 31 December 2021, made up of four people, all of whom are Non-Executive Directors. It considers the selection and performance of our investments and ensures that they are invested according to the Prudent Person Principle. The Committee meets at least twice a year. It helps the Board to have confidence in the approach to investment and performance of investment managers.

## What is the Prudent Person Principle?

This is a phrase in the regulations. It means that investments should be only those that a prudent person would make.

The Audit and Risk Committee (or 'ARC') is, at 31 December 2021, made up of three people, all of whom are independent Non-Executive Directors. It considers the effectiveness of our financial management, risk management and internal controls systems and the controls around compliance. The Committee draws on the work of the independent auditor, the internal auditor, the risk management function, the actuarial function and the compliance function. The Committee meets at least four times every year. It helps the Board have confidence in the quality of our system of governance and the accuracy of our financial statements.

# B. System of Governance

## Main Business Functions

There are three main functions of the business: sales and marketing, Member services, IT and operations, and finance, risk, compliance and actuarial.

The sales and marketing function is responsible for:

- presenting us to Members and Advisers before and after a product has been bought
- dealing with press enquiries
- writing and designing material
- finding new Advisers
- managing the relationship with Advisers
- agreeing commission rates, and
- designing new propositions and products and making sure existing ones remain fit for purpose.

Its role is to make sure there is a healthy flow of new Members.

The Member services, IT and operations function is responsible for:

- the handling of our Head Office activities involving Members and their products
- dealing with Members, underwriting and administration
- handling claims when Members cannot work
- keeping the IT systems going
- managing new IT developments
- looking after all aspects of the Head Office building
- disaster recovery planning (how the Society would cope in an emergency)
- people management, and
- project and change management.

Its role is to handle all aspects of supporting Members, as well as ensuring that the computer systems are working, the buildings are safe and so on.

The finance, risk, compliance and actuarial function is responsible for the money, be it money coming in from Members, money being paid to Members who are ill or injured (claims), or money being paid to cover commissions, wages, suppliers, training, insurance, consultancy fees etc. Part of this responsibility is the proper accounting for every penny received and spent. The function includes:

- the risk management systems (does the Society understand the risks it is running? Has it thought about how to manage risks to prevent a problem?)
- the actuarial function (is there sufficient capital, now and over the long term?)
- the compliance function (does the Society meet the rules?)
- the company secretarial function (are Board/ Committee meetings being run properly?)
- liaison with independent and internal audit and the actuarial functions, and
- liaison with the With-Profits Actuary.

Its role is to ensure that the Society is managed and controlled to the high standards expected of an insurer and that benefits can be paid when needed.

# B. System of Governance

## How the system of governance has changed during 2021

The system of governance has continued to be embedded throughout the Society.

The process to appoint two new Non-Executive Directors began, and these new Directors joined the Board in February 2022. The process to appoint a new Compliance Officer and a new Chief Actuary was concluded. The appropriate regulatory approvals are either done or are in progress.

The Board sub-committee to oversee the progress of the PRISM project was disbanded once PRISM was implemented. A new sub-committee to oversee IT development has been established, comprising two Non-Executive and two Executive Directors.

## Review of the System of Governance

The Board and its ARC have continued to monitor the performance of the system of governance and to suggest changes where necessary.

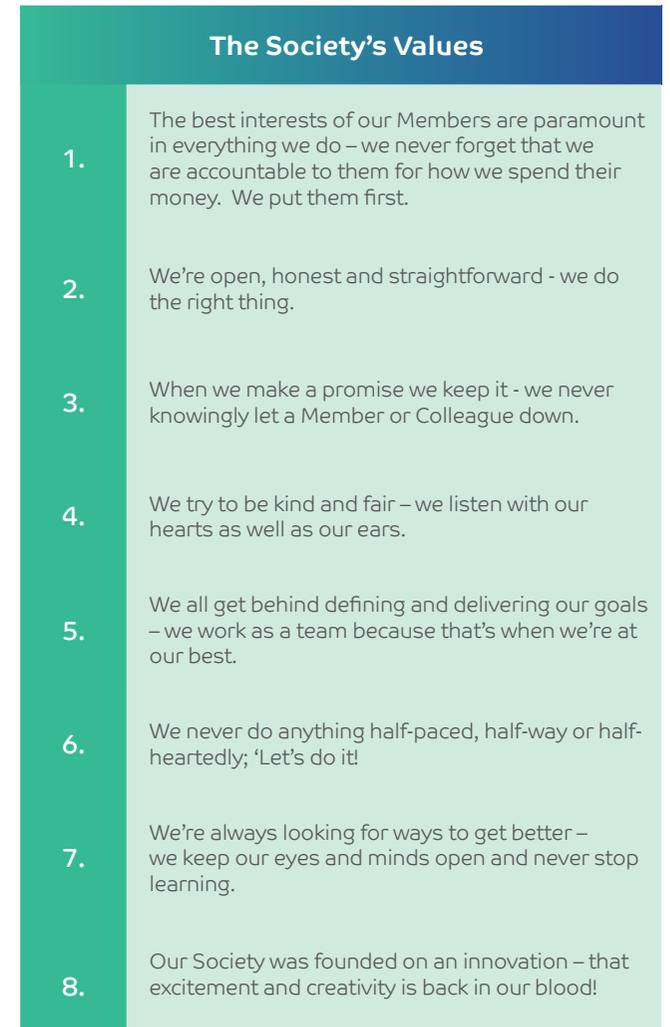
Boards are expected to be assessed by someone who is independent and external on a regular basis. In 2021, two separate independent pieces of work were commissioned covering Board effectiveness. The reports indicated high standards of governance were in place and gave some suggestions for further improvement.

## Remuneration Policy and Practice

We will only be successful if our people work hard and do a good job. The Society's future is in the hands of its employees, whom we call Colleagues, who need to be rewarded properly for doing a good job.

The Society's approach to paying Colleagues is set out in its Remuneration Policy. Our Remuneration Policy tries to make sure that the right behaviour at work is rewarded. This is a balance between continuing doing everyday work to the right standards and coping with the changes that growth requires.

We have a clear idea why the Society exists (to be there when Members need us the most – our mission) and what it has to be if it is to grow (to be the most recommended specialist provider – our vision). We have a clear idea of what makes the Society special (our values).



# B. System of Governance

## Remuneration Policy and Practice continued

The Remuneration Policy supports the mission, vision and values and tries to recognise and reward those who support them through their behaviour at work.

Rewards have to be in proportion to the overall success of the Society. They have to reflect each person's contribution.

Our Remuneration Policy is based on the following:

- there needs to be a balance between achievements and risk taking
- rules must be met, values demonstrated and standards maintained
- no-one should benefit through an accident or because the rules did not cover every possible situation (so payments are discretionary), and
- everyone should have the opportunity to earn a bonus based on how well they work.

Pay at the Society is made up of (i) salary, benefits and pension, (ii) either a sales incentive plan or an annual bonus plan and (iii) a long term incentive plan.

(i) Salary, benefits and pension are paid to all Colleagues.

The salary, benefits and pension are competitive. They are regularly compared with the pay and benefits of similar firms, at every level.

Benefits include car allowance, private medical and dental and other standard benefits (death-in-service, paid holiday, sick pay etc.). The benefits offered differ according to role and seniority.

(ii) The sales incentive plan is open to all Colleagues working directly in the sales function. All other Colleagues directly employed are eligible for the annual bonus plan.

The sales incentive plan generates bonuses based on quarterly and annual sales performance, and performance on a number of conduct and capability measures.

The annual bonus plan requires threshold sales and expense targets to be hit. If they are, a bonus becomes payable depending on performance against a set of numeric and activity targets.

As in 2020, the Society decided that it would be inappropriate to implement its previous style of Annual Bonus Plan. A simpler, more modest plan was put in place.

(iii) The long term incentive plan is open to selected members of the Executive Committee.

The long term incentive plan considers performance over three-yearly periods. It pays a bonus if the Society's value is higher than agreed targets each year for three years. Any bonus is decided upon after each three-year period is over, is at the Remuneration Committee's discretion, and is paid over the two years following the end of the performance period.

As in 2020, because of the pandemic, the Society decided not to introduce a long-term incentive plan for the period 2021-2023. It continues to consider alternatives.

In 2021, payments were made from the 2017-2019 and 2018-2020 long-term incentive plans. The 2017-2019 plan has now paid out in full. There are two further payments due from the 2018-2020 plan. All payments are subject to review by the Remuneration Committee and to clawback.

There are no open long-term incentive plans in place at the moment.

## The Purpose of Remuneration

We use pay to attract and keep good people who have the skills and experience that the Society needs to grow. Salary, pension and benefits are

# B. System of Governance

set in comparison with similar firms and to attract people to the Society.

All bonus plans should encourage the activities needed for the Society to grow and be affordable.

## Terms of appointment of Executive Directors and other members of the Executive

The employment terms, including pay, for the Society's most senior executive functions are overseen by the Remuneration Committee. No individual is involved in setting her or his own remuneration. We expect variable remuneration to form a significant part of Executive remuneration.

The long-term incentive plan should allow us to attract and retain Executives of the right quality and should encourage them to focus on building the Society's long-term value. The Remuneration Committee is responsible for all payments under this bonus plan. It can choose to ignore the amounts calculated from the bonus formulas, and instead to increase or reduce bonuses payable. It is expected that this would only happen to fairly reflect contributions made, where not to do so would be harmful to the Society's long-term success. The Committee can reduce, withdraw or claw back any payments under the long term incentive plan in certain circumstances.

No Executive service agreement has a notice period longer than one year and there are no loss-of-office or other benefits linked to resignation, except pay during notice periods. Any severance package for an Executive is subject to agreement by the Remuneration Committee. There are no early retirement or supplementary pension schemes.

## Terms of appointment of Non-Executive Directors

Non-Executive Directors are paid fixed fees. The fees reflect the work required of each role. There are no other benefits offered. The notice period is one month. There are no loss-of-office or other benefits linked to resignation from the Board. Re-election varies depending on time served, but no Director may serve for more than three years following their election at the Society's Annual General Meeting without re-election. Serving for more than six years requires particular consideration. There are no early retirement or supplementary pension schemes.

## Remuneration throughout the Society

The Remuneration Policy applies to all Colleagues. The annual bonus plan is open to all non-sales Colleagues. The sales incentive plan is open to members of the sales team, but not senior sales management (who instead are part of the annual bonus plan).

## Transactions with connected parties

During 2021, the Society did not do any paid work with people or firms which are closely connected with its Directors or senior managers.

## B.2 Fit and proper requirements

We need our Executive and Senior Leadership Teams to have the skills, knowledge and expertise to run the Society properly and to develop and implement our strategy. The most important quality is experience. Professional qualifications are important for some roles, as is a willingness to make the changes necessary to allow us to be there for our Members in their times of need and to demonstrate our strengths to Advisers.

### What is the Senior Leadership Team?

This is the group of people who work for members of the Executive. On a day-to-day basis, the Senior Leadership Team makes sure that the Society is properly run. Members of this team attend the monthly Executive, and some other Committee, meetings and, depending on their job may occasionally attend or present at Board meetings.

# B. System of Governance

Our Board ensures that those running the Society are properly qualified and have the knowledge and experience to do their work properly. They must have good reputations and have integrity. The regulator calls this being fit and proper. For the most senior people, the Nomination Committee ensures that applicants are fit and proper. For other roles, the Executive has this responsibility.

The regulator is kept up to date with all changes in senior management, including key function holders (the regulator's label for specific functions). We share the information used to confirm that someone is fit and proper. In particular, if someone was thought to be no longer fit and proper, we would tell the regulators.

When someone joins our Executive or Senior Leadership Team for a role that requires regulatory approval, a specialist firm is hired to collect the information needed to decide whether they are fit and proper. This firm considers fitness mainly by validating statements made by the candidate, including qualifications earned. It considers probity (a word used by the regulation to mean honesty or integrity) by searching for indicators of poor behaviour, including criminal record checks. It asks for references from previous employers. The Board ultimately decides whether it feels that someone at this level is fit and proper. For these roles, having made its assessment, the Board has to propose the

individual to the regulator to be approved before the person can begin in the role.

In all other roles, the checking process is tailored for the role.

## B.3 Risk Management System Including the Own Risk and Solvency Assessment

### (a) Risk Management System

Insurers are required to have an effective risk management system. This system must include strategies, processes and reporting procedures necessary to identify, measure, monitor, manage and report, on a continuous basis, the risks, at an individual and at an aggregated level, to which they are or could be exposed, and their interdependencies. This statement of what must be covered by the risk management system is taken from the regulations. We reviewed our Risk Management System in 2021.

Our Risk Management System is built around the business plan. Risks to the business plan are automatically considered when it is developed. The Risk Management System also covers the activities to improve governance and monitors the insurance risk elements of the Solvency Capital Requirement ('SCR').

### What is the Solvency Capital Requirement?

This is the amount that the regulator says the Society has to hold to ensure that Member benefits are secure in most circumstances over one year. We calculate it using a formula provided by the regulator. It is often shortened to SCR.

The Board is satisfied that the Risk Management System is effective. It is well integrated into the Board processes and is becoming embedded into other parts of the Society.

The Society's Risk Management System starts by defining the risks that the Society faces, split into risks to the business plan, governance risks, insurance risks (as defined in the SCR formula) and operational risks. A risk tolerance is defined for each risk. The tolerance links back to the business plan, governance plans, SCR and risk profile, or operational thresholds. Management then reports to the Board if one or more thresholds are or look like they might be, exceeded.

# B. System of Governance

## What is a risk tolerance?

Most measures of performance have an expected value or target. The risk is that the actual value is higher or lower than the target, to an extent that might cause harm or cause the business plan to be re-considered.

The Executive continually monitors risks, including operational risks, that come to light. Where appropriate, reports are made to the Board, to ensure that Directors are informed about the risks that materialise.

## What is operational risk?

Operational risk is the risk of some planned activity going wrong because a process fails, a system fails or someone does something wrong.

The regulator includes fraud and legal problems as operational risks.

The Society maintains a risk register.

## What is a risk register?

The Society's risk register is a list of the risks that it faces with details of how the risks are identified, measured, monitored, managed and reported.

We have established a management committee called the Risk and Controls Committee to review risk and internal control information, and to decide what should be passed to the Board and when. The risk management function is led by the Chief Risk Officer ('CRO') who is also the Chief Financial Officer and an Executive Director of the Society. As a member of the Executive, the CRO is always involved in discussions and decisions about strategy and tactics. The CRO makes sure that risk consequences are considered and sometimes has to respond to challenges about risk. Reporting is via the Risk and Controls Committee.

## What is solvency?

Regulators recognise that the more surplus money a firm has, the more secure the Member benefit. 'Solvency' is the jargon used by insurers to mean the surplus money that a firm has in excess of that needed to meet Member claims in most circumstances.

Insurers talk about capital rather than money. Capital is defined a little later on.

When considering a risk, insurers look at the impact the risk might have on their surplus capital - hence, the impact on solvency.

Generally, high or increasing solvency is a good thing, low or declining solvency is a concern, unless the change was planned or there is a good reason for it.

We regularly discuss how risk might affect outcomes and our solvency, even if no change is expected. We especially consider risk and the impact on solvency when developing new products or business initiatives. When the Board or a Committee has a decision to make, the papers describing the decision include CRO comment. The CRO is expected to cover the impact of the decision on our risks and our solvency. The result is that the Board makes decisions in full knowledge of the possible impacts of the decision on risk, on solvency and on the system of governance.

# B. System of Governance

## (b) Risk management function

Insurers are required to have a risk management function as part of their Risk Management System. The Society's CRO runs the risk management function. The risk management function makes sure that the Risk Management System works properly.

The Society's Risk Management System is aligned to its business planning. Business planning includes considering how the Society might perform in different scenarios, including if its risks materialise. There is an overlap between business planning and risk management and thus the performance of both functions by the same person, given the Society's size, is sensible.

The CRO reports to the Chair of the ARC on risk matters and is a Director of the Society. These arrangements provide the authority necessary for the role. The CRO regularly discusses the work for the risk management function, its resources, and the Risk Management System, with the ARC.

## (c) Own risk and solvency assessment

### What is an Own Risk and Solvency Assessment?

The regulations require insurers to undertake an Own Risk and Solvency Assessment, or ORSA, whenever its risks change, or at least annually.

The ORSA is a judgement by the Board of the insurer's risks and the impact on the insurer's solvency. Importantly, it is the Board's view, not the regulator's (and not necessarily the view using the regulatory formula).

The starting point for the own risk and solvency assessment (ORSA) is the ORSA policy. This is a document required by the regulator to set out how an ORSA is to be done.

The ORSA process is a series of steps. The Board and others consider all of the risks that we face and their possible impact. The impact of each risk might be how it affects capital, how management has to behave to manage the risk, or a mixture of both.

### What is capital?

Capital is the name for the resources available to meet the Society's outgoings.

For the Society, capital is made up of cash, investments and the difference between payments from Members (inflow) and future claims and expenses (both outflow).

We design a number of risk tests. Some just look at a single risk and suggest the extent to which it might move. Others look at groups of risks occurring together. The tests are used to see the impact on the Society if risks occur as suggested. The Board considers the results and may ask for new tests when it sees what the first results reveal.

When the Board is satisfied that it has considered all possible risks, it can start to think about the right level of solvency given those risks. The Board needs to decide how much surplus capital it needs to be sure that Member benefits can be paid when due, despite all the risks.

### What is surplus capital?

Surplus capital is the capital over and above that needed to meet expected Member benefits and the SCR.

# B. System of Governance

We then perform a number of routine checks before drawing up a draft ORSA report for the ARC to consider. Based on the ARC's views, a final report is presented to the Board. This includes the Board's proposal on the necessary level of surplus capital that we need to have confidence that Member benefits can be paid. Once agreed by the Board, the report is sent to the regulator.

Throughout this process, an ORSA record is kept containing details of the intermediate results and discussions on risk matters.

Once the ORSA report is agreed, the Board conducts a review of the process. The results of the review are fed into the review of the ORSA policy and the next scheduled ORSA.

The results of the ORSA have to be shared throughout the Society. Integrating the ORSA is part of the risk management function work described earlier.

The ORSA is expected to happen at least once per year. We deferred this year's ORSA with the regulator's permission, because we wanted to use the end-2021 valuation results as the basis for the ORSA projections.

The ORSA is now considered as part of the Society's strategic planning and the results are routinely used in business decisions and business projections.

## (d) Decision making

Insurers are required to write down their decision-making procedure as part of their risk management system. We have done this.

We have taken steps to ensure that the Board does not make decisions without understanding the risks to that decision. One of the purposes of the Risk Management System is to ensure that all of the risks affecting major decisions are understood and that ways to manage or remove risks are considered before the decision is made. Thinking about risk as a day-to-day feature of decisions, rather than something separate, should improve the quality of Board and Committee decisions.

## B.4 Internal Control System

### (a) About the internal control system

Insurers are expected to have an effective internal control system.

We have an effective internal control system, which covers administrative and accounting procedures, an internal control framework, appropriate reporting arrangements at all levels of the Society and a compliance function. These are regulatory requirements.

Our internal controls are generally managed by the person responsible for each function. These managers are responsible for making sure that there is the right mix of controls and for managing changes safely within their functions.

Each manager assesses the effectiveness of their controls and discusses their plans to improve controls where necessary with the Risk Officer and their manager. After each quarterly meeting with the Risk Officer, a report is produced for the Risk and Controls Committee, which in turn produces a report for the ARC.

The Risk Officer is responsible for documenting and managing internal controls.

These structures and accountabilities (regulatory jargon) form the Society's internal control system.

In conclusion, the Board is satisfied that the Society has an effective internal control system.

### (b) About the internal control system

The regulator requires that every insurer has an effective compliance function.

# B. System of Governance

The compliance function advises the Board on the effectiveness and completeness of the structures in place to ensure that the Society complies with the laws, regulations and rules of Solvency II and a number of other regulations. It considers changes in regulations and how they might affect the Society. The function considers the risk of non-compliance.

## What is Solvency II?

Solvency II is the name given to the regulations that UK insurers have to follow. It sets out what insurers have to do to protect Member benefits.

The areas discussed in this document are all required under Solvency II, as is the production of this document.

The Compliance Officer is appointed by the Board and has a direct reporting line to the ARC Chair and to the Chief Executive as well as a day-to-day reporting line to the Chief Financial Officer. These arrangements provide the authority necessary for the role.

The Compliance Officer is industry experienced and has access to external support should it be needed. Their responsibility covers compliance, money

laundering, other financial crime prevention and data protection. The Chief Financial Officer is the Board-appointed Director responsible for money laundering and financial crime controls.

It is important that, while the Compliance Officer is employed by the Society, she or he can independently decide whether something is in accordance with the rules, without being swayed by her or his manager or by wider management. The Board is satisfied that the Compliance Officer has operational independence by nature and professional training, and that this is maintained through the reporting line to the ARC.

The Society's planned compliance activities, including compliance monitoring, are set out in an annual compliance plan that is considered by the ARC. It reports progress on this and any other compliance work at regular ARC meetings. It is available to all other functions of the Society to offer advice.

The activities selected for inclusion in the plan depend on the Compliance Officer's assessment of the areas that require review in the light of both the Society's business plan and issues emerging which have a compliance implication. The Compliance Officer regularly considers whether the function has enough time and resource to ensure that the Society is appropriately compliant and reports her conclusions on this subject to the ARC.

In conclusion, the Board is satisfied that the Society has an effective compliance function.

## B.5 Internal Audit Function

The regulator requires that every insurer has an effective internal audit function.

The internal audit function considers the adequacy and effectiveness of the internal control system and other elements of the system of governance. It is objective and independent from the operational functions. These are regulatory requirements.

Internal audit performs an independent risk assessment and agrees the areas it will investigate with the ARC. It produces a report after each investigation describing its findings and its recommendations. This report is presented to management, which ensures that appropriate actions are taken within an appropriate timescale. A summary of activity and investigation results, including progress towards implementing the recommendations, is provided to the ARC by the internal audit function.

The internal audit function has, throughout 2021, been provided by a professional services firm called EY.

# B. System of Governance

Over a multi-year cycle, EY agrees the areas to be investigated with the ARC and produces a work plan for the next year. During 2021, a number of investigations were carried out, covering the areas deemed highest risk by the ARC. A report was produced after each investigation as well as an annual report on our governance, risk and controls.

By using an external firm as internal auditor, we judge that internal audit is independent and objective. EY does not provide any additional services to the Society.

The Chair of the Audit & Risk Committee serves as the Head of Internal Audit. A member of the compliance team liaises between the Head of Internal Audit, the internal auditor and the ARC. These arrangements ensure that the function has appropriate authority.

As part of continuing review, the Head of Internal Audit regularly considers whether there is enough resource, in terms of days of EY time, directed to internal audit work, and discusses his conclusions on this subject to the ARC.

In conclusion, the Board is satisfied that the Society has an effective internal audit function.

## B.6 Actuarial Function

The regulator requires that every insurer has an effective actuarial function.

### What is an actuary?

An actuary is a specialist insurance professional who is trained in actuarial work.

Actuarial work tends to involve projecting events over the long term. Events include sickness, investment returns and expenses.

Actuaries use these projections to confirm the financial health of insurers.

We had an in-house Chief Actuary until 31 May 2021. Thereafter, Alison Carr of Steve Dixon Associates llp carried out this function. Alison was approved in this role by the regulators on 18 November 2021.

The actuarial function carries out a number of tasks set out in the regulations and provides a number of required reports to the Board.

The Chief Actuary heads the actuarial function and reports to the Chief Financial Officer, with explicit additional reporting lines to the ARC. These arrangements ensure that the function has appropriate authority.

The Chief Actuary liaises with the ARC and the Board throughout the year, especially when there are decisions to be made that require actuarial advice. The Chief Actuary is always available to members of the Executive and Board to discuss matters of actuarial interest.

The Chief Actuary is industry experienced and has access to external support should it be needed.

It is important that the Chief Actuary can independently decide whether something is in accordance with the rules or guidance, without being swayed by her or his manager or by wider management. The Board is satisfied that the Chief Actuary has operational independence by her nature and professional training, and that it is maintained through the reporting line to the ARC.

OAC continues to provide our With-Profits Actuary. The contract is an annual one, which has been in place since 1 January 2010. The With-Profits Actuary is industry experienced. She carries out a number of tasks set out in the regulations, including recommending bonus rates on With-Profits plans to the Board.

OAC maintains a small team focused on the Society's affairs, led by the With-Profits Actuary. This team works for other OAC clients as well as the Society.

# B. System of Governance

OAC takes steps to ensure that any conflicts are managed, and it discusses these with the ARC where necessary. OAC liaises with the Chief Financial Officer to plan the work required and to ensure that there is sufficient resource available to perform it to the appropriate standard. The With-Profits Actuary reports to the Chief Financial Officer with an explicit additional reporting line to the ARC. These arrangements ensure that the With-Profits Actuary has appropriate authority. By using an external firm, we judge that the With-Profits Actuary is independent and objective.

In conclusion, the Board is satisfied that the Society has an effective actuarial function, including the Chief Actuary and the With-Profits Actuary.

## B.7 Outsourcing

We outsource some functions of our business, including:

- investment services
- computer system development (part)
- hosting of web-based services
- telephone interviewing and data collection, to aid underwriting
- initial medical reviews and nurse triage
- mailing and AGM voting management
- call recording
- internal audit (see B5)
- Chief Actuary services, (see B6), and
- With-Profits-Actuary services (see B6).

In all cases, we remain fully responsible to our Members for the quality of the service.

We do not outsource critical or important operational functions or activities if we judge that

the result would be a poorer system of governance, would unduly increase operational risk, would reduce the regulator's ability to oversee the extent of our compliance with its rules, or would undermine continuous and satisfactory service to Members.

We outsource typically to UK-based organisations, although some work may be done elsewhere in the world. In these cases, we take steps to ensure that the provider agrees that no personal information is sent outside the UK without proper measures to keep it safe.

We alert our regulator prior to any outsourcing of critical or important functions or activities as well as to any subsequent material developments regarding those functions or activities.

## B.8 Any Other Information

Following the pandemic, the Society is trialling agile working, recognising that the controls to support this new way of working are different from those used hitherto.

Solvency and Financial  
Condition Report 2021

# C. Risk profile

# C. Risk Profile

The Society's risks are not unusual. They are managed transparently.

## C.1 Underwriting Risk

Underwriting risk is the risk that we don't charge our Members enough to cover the claims payments that we need to make and the expenses that we have to cover. In assessing our underwriting risk, we have to think about the health of new Members, the health of existing Members, how many claims we are receiving and their length, how long Members keep paying for cover, what we can earn on our investments at what risk, and how much it costs us to run the Society, including paying commission to Advisers for new sales.

The main way to assess our underwriting risk is to compare what we assumed when we determine how much to charge for insurance cover with our experience.

### What is experience?

Insurers make a lot of assumptions in their planning and projections. Experience is the term used to describe what actually happened rather than the assumption that was made.

## Sickness

We assess every potential new Member's health and lifestyle so that we can decide the insurance cover that we can offer and the cost and conditions of that insurance. There is a risk that Members are ill or injured more often or for longer than we assume. We may find that we have charged too much or too little, or we might not have applied the right extra conditions.

We compare the sickness and other benefit payments made each year with our assumptions. If the number, value or duration of claims is higher or lower than assumed, we consider whether we need to change our prices and reflect this difference in our financial statements.

### What is a valuation?

Every year, we are required to calculate the value of the plans that we administer, primarily to make sure that we have enough capital to meet the benefits that are due to Members. This process is called the valuation.

Most of our products have guaranteed payment rates, so it is important that the experience is as close as possible to that assumed.

We assess the risk of worsening sickness by close monitoring of new claims and active management of existing claims. We mitigate it by better underwriting at point of sale, better pricing and effective underwriting at claims stage.

We continually review our claims procedures to ensure that they are effective for Members.

## Lapses

We assume that some products will stop paying every year. When this happens, we say the product has lapsed. We compare the number of products that actually lapse with the number that we assumed. Every product that lapses leaves fewer to bear the remaining expense. Thus, lapse risk and expense risk are connected.

### What is a lapse?

When a Member decides not to continue with their product, we say that it has 'lapsed'.

Products may also end because the Member dies, the Member reaches retirement or the product reaches its maturity date.

# C. Risk Profile

Every year we look at how many products have stopped paying, usually divided up by features that may mean Members are more or less likely to lapse. We compare this with our assumptions. We assess emerging lapse risk by closely monitoring payment collections and other processes which might lead a Member to decide not to continue with their product.

Lapse risk is mitigated by prompt service, sensitive review of individual circumstances (recognising that lapse may be appropriate in some circumstances) and by thinking about how to ensure that Members keep their product going where it is sensible for them to do so.

## Expenses

Expense risk is the risk that expenses are higher or increase more quickly than we expected. It is important that our expenses are appropriate for the Society's size, so we monitor the expense per product as well as overall expenses. If there are fewer products than expected, even if expenses are as budgeted, the expense per product will be higher. There are several reasons why there might be fewer products than expected. The most common are because our sales are lower or because more lapse.

We assess expense risk by continually monitoring spending and the number of products in place. We mitigate it by planning and careful use of resource.

## Other health risks

There is a risk that Members die and their plans cease earlier than expected. There is a risk that Members live longer than expected. Neither of these risks is very significant for us. There is a risk that future sickness is higher than expected because of long-covid. The possible impacts are difficult to know with certainty at the moment. We will continue to monitor its effects as claims are received.

## Concentrations

Sickness and lapse risk are very material for the Society. Beyond this there is no obvious concentration of risk, other than by product type and by Adviser. We always aim to sell a large volume of each of the products that we offer and to sell through a variety of Advisers.

## Reinsurance

We do not generally use reinsurance, although we may do so in future.

## Underwriting Risk Sensitivity

Table 5 shows the sensitivity on Own Funds to the underwriting risks described above:

**Table 5: Approximate Impact of Changes to Assumptions on Own Funds, £000 — Underwriting Risks**

		2021	2020
Own Funds as at 31 December		77,600	59,807
Assumption	Change	Impact	
Spells of sickness	sickness incidences increase by 10%	(3,806)	(5,431)
Length of sickness	sickness recovery rates reduce by 10%	(5,696)	(13,531)
Death rate	10% fewer Members die	(214)	(882)
Lapse rate	10% more Members leave	(6,542)	(5,032)
	10% fewer Members leave	7,394	4,996
Expenses	10% increase in servicing expenses	(2,188)	(1,779)

The sensitivity tests are carried out by individually varying the assumptions as described and re-calculating the Society's Own Funds in full.

## Outlook

In ordinary times, our underwriting risk would be expected to increase as a result of the Society's growth plans. Given the economic impact of the pandemic, our growth plans have been

# C. Risk Profile

re-assessed.

This may mean that some risks do not grow as quickly as expected. On the other hand, we may see more claims than we expected because of the coronavirus, more lapses or have to spend more, at least on a per product basis. This may lead us to review our underwriting and claims handling and our expenses.

## C.2 Market Risk

Market risk is the risk that asset values fall or risk-free interest rates do not move as expected.

The size and nature of our market asset risk depends on the assets that we hold. For the Society, this includes the risk that our investments in equities, bonds and property fall or there is an adverse movement in foreign currency exchange rates on any non-GBP denominated assets. There is a risk that our assets become overly concentrated in a small number of issuers so are at risk of one of these failing. All of these asset market risks are small for the Society.

The material market risk for the Society is a change in risk-free interest rates that could lead to an increase in the liability that needs to be held for our plans. As the number of plans increase over the year the market risk related to risk-free interest rates has increased. The risk-free interest rates

have fallen due to the pandemic meaning that our liabilities have increased as has the risk related to movements in risk-free interest rates.

One way to reduce the risk-free interest rate risk is to match the outgo on our liabilities with the income from our assets. Matching is difficult for us due to the nature of our liabilities so mitigating this risk over the long-term is not possible for us.

Over the short term we can work out roughly how much we might be called upon to pay and at what times, based on assumptions about the future. We know, from our business plan, how much we expect to spend on commission and day-to-day expenses. With this information, we can make sure that we strike the right balance between immediately available, short-term assets and assets invested for the longer term.

Matching by currency is straightforward. All of our liabilities are denominated in Great British Pounds ('GBP'), so we match by investing mainly in GBP-denominated assets. As a result, our currency risk is low.

We invest our assets in line with the Prudent Person Principle, as required by regulation.

We ensure this by carefully selecting investment managers and designing their instructions to cover the security, quality, liquidity and profitability of the assets they select. Assets are always invested in

the best interests of Members.

We only invest in assets where we can properly identify, measure, monitor, manage, control and report, and appropriately take into account their risks in our assessment of solvency.

We mitigate market risk by ensuring that our investment policy is set with a proper understanding of the nature of the Society's liabilities and its future cash demands, by specifying the degree of diversification required, selecting suitable benchmarks and by monitoring the activity of the selected investment managers.

We invest in a wide range of assets to reduce the chance that poor performance or the failure of a single asset could have a significant impact on the performance overall. Section D.1 describes the portfolio in terms of the different types of asset.

We hold equities and bonds from a diverse range of issuers, so our asset concentration risk is very low. The only property that we hold directly is Holloway House, our headquarters, but as this has a low value in comparison to our other asset holdings it attracts low concentration risk.

# C. Risk Profile

## Market Risk Sensitivity

The Society is sensitive to changes in a number of economic factors. Table 6 shows the impact on Own Funds of changes in these factors:

Table 6: Approximate Impact of Changes to Assumptions on Own Funds, £000 – Investment			
		2021	2020
Own Funds as at 31 December 2020		77,600	59,807
Assumption	Change	Impact	
Risk-free yields	risk-free yields increase by 100 basis points	(9,467)	(5,601)
	risk-free yields reduce by 50 basis points	5,596	2,607
Corporate bonds	corporate bond asset values fall by 10%	(1,209)	(1,519)
Inflation	inflation falls by 50 basis points	(2,270)	(1,496)

The sensitivity tests are carried out by varying the individual assumptions as described and recalculating the Society's Own Funds in full.

## Outlook

The risk from changes to risk-free interest rates is expected to increase over the business plan term as more plans are sold and the liability for these increases in size. The current low interest rate environment, which has been exacerbated by the pandemic, has increased this risk.

The risk from falling asset values is expected to reduce over the business plan term: the value of assets is expected to fall as more money is paid out as commission for new business, to meet the higher expense base and as an investment in the Society's strategy. Recent market volatility has had a limited effect on the Society's balance sheet.

## C.3 Credit Risk

Credit risk is the risk that someone owes you money and cannot pay. It exists with Adviser commission balances and reinsurance recoveries.

We pay commission to Advisers assuming that a number of payments will be made by the Members that they introduce. If a Member ceases paying earlier in the product lifetime, we expect the Adviser to repay some of the commission that they received. This is a credit risk, that is the risk that the Adviser will not have the money to repay. We think that this risk is low because we choose Advisers carefully and continually monitor the amounts

owing. As sales have grown, the size of this risk has increased. With the economic uncertainty introduced by coronavirus, there may be more products lapsing and some Adviser firms may not be able to repay their commission debt.

We have some agreements with reinsurers. We expect them to pay a proportion of claims on some plans. This is a credit risk, that the reinsurer cannot pay us. We think that this risk is low because we have such low levels of reinsurance and we only use high quality reinsurers.

## C.4 Liquidity Risk

### What is liquidity and liquidity risk?

Liquidity is the term used to describe how easy it is to get hold of cash when it is needed. Liquidity often changes when economic factor changes: for example, sometimes property is easy to sell, sometimes it is harder to sell, depending on interest rates, market activity etc..

Liquidity risk for us occurs when a benefit cannot be paid because we cannot physically get hold of the cash to pay. We take steps to make sure that the Society is not exposed to this risk.

# C. Risk Profile

Liquidity risk arises if we cannot pay a claim when it falls due because we could not physically provide the cash, even though we have sufficient assets.

Our sources of cash are payments from Members, investment income, sale of investments and reinsurance payments. Generally, Member payments are a reliable and high-quality source of liquidity. The liquidity expected from investment income and asset sales depends on the instructions we give to investment managers. We want to invest in high quality assets with good liquidity, but we know that we don't need all of our assets to be in cash immediately. By investing to match the expected claims by timing, we can increase the return expected without affecting our ability to pay Member benefits.

We invest our cash and deposits across reputable institutions with high credit ratings, and thus high liquidity, over the short term. The quality is measured by the credit rating of each bank or fund. We choose a mix to reduce our reliance on a single bank or fund. We have a significant holding in a cash fund approved by the Board and recommended by LGT Vestra LLP. We believe that this fund is diverse and well managed.

We have taken steps to increase our liquidity in case of higher claims from Members who cannot work because of coronavirus. As discussed in C.2,

we monitor and manage our short-term expected cashflow to ensure we have enough immediately available, short-term assets.

As a result of this management, our liquidity risk is low and is expected to remain low.

The regulators require us to note that the valuation of our income protection plans includes expected profit in future premiums of £102.254m (2020: £75.498m). This is important because this expected profit is available to meet Member benefits over time regardless of how liquid our assets are. That said, this amount is generated over the lifetime of the products, so it may not be available when it is needed.

## C.5 Operational Risk

Operational risk is a wide category of risk. It is the risk of something going wrong. This might be people working in the Society doing things wrong, or not doing things that they should. It might be a process that is faulty or a process that is missing. It might be a computer program that goes wrong or a computer system that crashes. It might arise from a fraud, from a reputational failing or from poor strategy. There doesn't tend to be an upside from operational risk.

Our exposure to operational risk is high because we are changing so much of what we do. Change always invokes risk, because things don't always go to plan. We seek to manage operational risk

by planning carefully, thinking about risks, and managing people and projects with sensitivity and understanding. We try and make sure that we consider what might go wrong before we make a change, that we test and check things while in development, and that when a change is finally introduced, we monitor it carefully to make sure the expected result is achieved. Our high governance standards, as described in section B, help reduce the likelihood of operational risks materialising.

We measure operational risk through the Risk Management System (see B.3) and through the Internal Control System (see B.4). By its nature, we are managing a number of often-very-different risks under the heading of operational risk. The measures used are particular to the individual risk.

The impact of operational risk on the business plan is considered in the ORSA. For most operational risks, when they materialise, the effect is on the level of sales or expense or both.

We have no significant concentration of operational risk. We protect ourselves against the financial effect of legal challenges through directors' and officers' insurance. We have insurance for fire, theft etc., using an appropriate insurance policy.

The Society's risk management and internal control systems make sure that operational risk is managed to acceptable levels. Section B.3 gives more details.

# C. Risk Profile

## C.6 Other Material Risks

We assess material risks in our ORSA. We consider the business plans and the areas where results are uncertain. We then consider the range of possible results within normal conditions allowing for individual risks and for groups of risks happening together. The risks that have the greatest impact on solvency are the most material risks.

The Board has to assess all of the Society's risks continually and all known material risks are discussed in sections C.1 to C.5. That said, there is the possibility that an unexpected risk emerges. A risk assessment would be incomplete if it did not mention this possibility.

## C.7 Any Other Information

There is nothing additional to report.

Solvency and Financial  
Condition Report 2021

# D. Valuation for Solvency Purposes

# D. Valuation for Solvency Purposes

## D.1 Assets

The value of our assets on a Solvency II basis is shown in Table 7:

Asset Type	31 Dec 2021	31 Dec 2020
Property – office, own use	775	775
Equities – listed	1,530	1,605
Bonds – government	6,717	8,596
Bonds – corporate	10,243	12,432
Bonds – other	502	503
Tangible assets	87	120
Collective investment undertakings	939	1,075
Assets held for Unit Linked contracts	718	746
Cash with investment managers	2,342	2,540
Cash at bank and in hand	331	629
Other	295	206
<b>Solvency II Asset Value</b>	<b>24,480</b>	<b>29,227</b>

The office property is assessed every three years by a qualified valuer at open market value (last performed in November 2020) and a desktop valuation annually in the interim.

Equities, government bonds, collective investment undertakings, and corporate and other bonds are valued using quoted market prices in active markets provided by third party pricing sources. Cash and cash equivalents are included at face value.

There have been no changes to the valuation approach used and no significant exercise of judgement in arriving at the values shown.

There are no unlisted equities, derivatives, loans or mortgages. Leasing arrangements are as at the balance sheet in the 2021 financial statements. There are no deferred tax assets.

The rules for considering solvency are different from the rules for presenting financial information. The solvency rules are concerned with Member protection. The financial information presentation rules are concerned with providing a true and fair view. One difference in practice is that what can be treated as an asset is different. Solvency assets cannot include intangible assets (for us, work done to develop plans or systems that are not yet live) and some prepayments. Solvency assets cannot include Technical Provisions.

We use the same bases, methods and main assumptions to value assets for solvency purposes as we use in our financial statements, other than the exceptions shown below in Table 8 which reconciles the differences:

	31 Dec 2021	31 Dec 2020
<b>Value of assets presented in financial statements</b>	<b>84,751</b>	<b>67,556</b>
Intangible assets: administration system	(4,480)	(4,152)
Intangible assets: product and software development	(34)	(98)
Technical Provisions gross of reinsurance, excl Unit Linked	(55,757)	(34,079)
<b>Solvency II value of assets</b>	<b>24,480</b>	<b>29,227</b>

# D. Valuation for Solvency Purposes

## D.2 Technical Provisions

We have to calculate two numbers that measure the value of our plans: the Best Estimate Liability and the Risk Margin. Added together, these numbers are called the Technical Provisions.

The Best Estimate Liability is the realistic assessment of every product's worth when administered by the Society.

The Risk Margin is the extra money that someone else would require to take on the Society's plans and look after them, in the same way that we do. It is calculated using a formula set by UK regulations.

The Technical Provisions are calculated by the actuarial function. The approach is well established.

We have to calculate the Technical Provisions for all of our products. Since the Society began in the 1870s, it has offered a number of different product types. We continue to administer all of these for as long as our Members wish to keep their products going, whether or not we currently offer them to new Members.

Table 9 summarises the Technical Provisions by line of business:

Table 9: Technical Provision Components, £000						
Product Type	Income Protection (Health)		Unit Linked		Total	
	2021	2020	2021	2020	2021	2020
Best Estimate Liability	(93,689)	(67,938)	718	746	<b>(92,971)</b>	<b>(67,192)</b>
Risk Margin	37,931	33,859	-	-	<b>37,931</b>	<b>33,859</b>
TP	<b>(55,757)</b>	<b>(34,079)</b>	<b>718</b>	<b>746</b>	<b>(55,040)</b>	<b>(33,333)</b>

### (a) How are the calculations done? The Best Estimate

#### Income Protection (or IP) Plan Types

We calculate the expected expenses and claims costs for each product and subtract the expected payments. The difference between the two numbers is the net cash outflow. We calculate the net cash outflow for each product, month by month.

The net cash outflow is made up from all the possible things that might happen on a product. Then, for each product, for every future month, we calculate the net cash outflow in that month:

$$\begin{aligned} \text{Net Cash Outflow} &= \text{expected monthly sickness benefit} \\ &+ \text{expected expenses (to cover investment and administration)} \\ &- \text{expected payments} \end{aligned}$$

# D. Valuation for Solvency Purposes

The calculations include assumptions about the probability that a Member becomes sick and, if so, for how long, or that their product lapses or ends for any other reason. We separately consider products where Members that are currently sick and receiving payment so that we allow for the additional cash outflow.

We assume that each product bears an equal share of the investment and administration expenses for every month and that the total expenses are covered in full. We expect new products to bear their share of future expenses, and we allow for products that end, whatever the reason.

The monthly cash flows are added up and converted to today's value: that is, a lump sum now equivalent to all future cash flows. This value is the Best Estimate Liability for these products.

To convert the future cash outflows to today's value, we use risk-free interest rates provided by our regulator, the PRA, with no adjustment.

The technical name for this approach is the gross premium valuation. The technique being used to calculate a lump sum is called 'discounting projected monthly net cashflows'.

Some WP products have benefits on maturity, death or lapse. We have some discretion over these payments. We allow for their expected cost within

the Best Estimate Liability. Each year, the benefits on these plans are increased by different types of bonus reflecting investment returns and other surplus generated over the year.

We have some reinsurance arrangements in place on a small number of older products. None of these arrangements are material. They have been ignored in the valuation.

## Unit Linked (or UL) product types

The Best Estimate Liability for these products is the value of the benefit payable on request. No new payments from Members are expected on these products.

## Other product types

There are fewer than ten policies where the Best Estimate Liability is not calculated but is set to zero on the grounds of materiality.

## (b) How are the calculations done? The Risk Margin

The Risk Margin is an amount over and above the Best Estimate Liability equal to the amount that another insurer would need to take on the Society's business.

The regulator sets out how the Risk Margin is to be calculated. The Risk Margin is the cost of holding

the SCR (see B.3 and E.2), excluding the market risk component, required in every future year, allowing for a required return of interest of 6% per year.

The full formula set down by the regulator can be quite onerous for an insurer as small as we are. The regulator recognises this and has allowed a simpler formula to be used. We have decided to use 'simplification 1', which estimates the future SCR in proportion to the underlying risk driver of each risk. So, for example, the amount of capital held in respect of sickness risks is assumed to change in proportion to the expected value of future sickness benefits payable.

## (c) Assumptions

The calculations need a number of things to be assumed, specifically:

1. if and when Members might fall sick and how quickly they might recover
2. if and when Members might stop paying
3. how much it will cost to run the Society and implement its strategy
4. how expenses and benefits will change over time, and
5. if and when products might end because of death.

# D. Valuation for Solvency Purposes

## 1. if and when Members might fall sick and how quickly they might recover

We investigate our sickness experience every year, although there are relatively few cases. We look at how many Members become sick and how long it takes them to recover. The low number of cases means that it is harder to use the experience to decide on an assumption. We therefore consult industry data which suggests rates of sickness and recovery. The tables we use are called CMIR12.

We use our sickness experience to adjust the CMIR12 tables so that they are appropriate for our experience. The adjustments used vary by main product group and duration of sickness. We have recently carried out a review of the approach used to calculate these adjustments and we have increased the Technical Provisions to include the updated approach.

## 2. if and when Members might stop their plans

If a Member stops paying for their cover, the product is said to have lapsed. The lapse rate is the proportion of products that lapse during a given period. The assumed rates of lapse used for the valuation are set based on recent lapse experience by main product groups.

## 3. how much it will cost to run the Society and implement its strategy

In the valuation, we work out the expense that we expect to incur in all future years from 1 January 2022, based on the activities we expect to carry out.

The type of expense is important. Some expenses are expected to occur every year (for example, the expense of people to look after Member queries). Some expenses are linked to sales and only happen once in a product's lifetime. Others are one-off, such as the investment in PRISM. The projections that we use take into account the expenses related to the business in force at the valuation date but not expenses on future sales.

## 4. how expenses and benefits will grow with inflation

We make assumptions about how our costs will grow. We make assumptions about how payments and cover levels will change where they are linked to inflation.

## 5. if and when plans might end because of death

We use industry tables to assess if and when products might end due to death, although the impact on the Best Estimate is very small. For Members who are currently healthy we use the AMCOO tables, and for Members who are sick we use the CMIR12 tables. As for sickness, we adjust these tables so that they reflect our recent experience.

## Other Relevant Information

### Currency

Our liabilities are all recorded in GBP.

### Options and guarantees

None of our plans have financially significant options or guaranteed surrender values.

### Uncertainty associated with the value of Technical Provisions

Calculating Technical Provisions involves predicting the future. All of the predicted values are determined using assumptions, which may not work out in practice.

# D. Valuation for Solvency Purposes

The uncertainties include economic uncertainty (e.g. what will interest rates be?), Member behaviour (e.g. when might Members make withdrawals from their plans?) and fate (e.g. when might a Member fall sick?). In practice, the uncertainties might increase or reduce the cash flows, and hence increase or reduce the Best Estimate Liability.

Society's Technical Provisions are particularly sensitive to:

- the risk-free interest rates set by the regulator
- expense assumptions, given the scale of the change that the Society is undergoing
- sickness assumptions, given the lack of data to support the assumption setting, and uncertainty on future sickness levels, and
- lapse assumptions, given the lack of data to support the assumption setting, potential changes in Member behaviours and the sensitivity of lapse rates to changes in regulation and general economic health.

The long-term impact of the pandemic is not yet known and could lead to changes in the assumptions used to calculate the Technical Provisions in future.

## Use of Transitional Measures

The regulator allows insurers to use 'transitional measures' or a 'volatility adjustment' or a 'matching adjustment' if they need to. We do not need to. The Society has not used transitional measures or the volatility or matching adjustment.

## Differences between Solvency Valuation and Financial Statement Valuation

We use the same bases, methods and main assumptions to value liabilities for solvency purposes as we use in our financial statements.

### What are the financial statements?

Financial statements are the reports that we are required to produce by law. They are available on our website or on request, free of charge. They are sometimes referred to as the Report and Accounts.

## D.3 Other liabilities

The Society's other liabilities are Creditors as shown in Table 10 below.

Table 10: Creditors, £000		
Liability Type	31 Dec 2021	31 Dec 2020
Arising out of reinsurance operations	7	7
Claims outstanding	217	294
Other creditors including tax and social security	1,696	2,348
<b>TOTAL</b>	<b>1,920</b>	<b>2,649</b>

There is no observable market for these specific liabilities or any similar liabilities that could be regarded as a suitable basis for the valuation. The value is therefore an estimate of the expected cash flows, so based on the settlement value. No account has been taken of the effect of discounting the settlement values as the effect is deemed to be immaterial.

We have some obligations that we have to meet within the next 12 months. Their value has been based on settlement value and in accordance with our chosen accounting policies as used in our financial statements. The financial statements are available on our website, [www.holloway.co.uk](http://www.holloway.co.uk)

# D. Valuation for Solvency Purposes

## D.4 Alternative methods for valuation

We don't use any other alternative methods for valuation.

## D.5 Any other information

The results set out in this report show the position at 31 December 2021. We are comfortable that we do not need to make any additional adjustments for the possible impact of the pandemic within the Technical Provisions or assets shown in this section based on the information we know now. This could change as understanding of the effects of the pandemic on the long-term develops.

There is no other material information regarding the valuation of assets and liabilities.

Solvency and Financial  
Condition Report 2021

# E. Capital Management

# E. Capital Management



## E.1 Own funds

We are governed by the Friendly Societies Act 1992. Under that Act, the Society is an incorporated society with a single Members' fund and no defined mutual member fund. As such, it has no shareholders and our Members are the Society's ultimate owners. The Society's organisation is very simple: all its capital is held in tangible and realisable assets.

The table below, a copy of Table 1, shows the Own Funds and Surplus Capital:

Item	31 Dec 2021	31 Dec 2020
Own Funds	77,600	59,807
Solvency Capital Requirement	45,758	41,983
Surplus Capital	31,842	17,824

### What are Own Funds?

This is jargon for an insurer's total assets less liabilities, counted using the rules of Solvency II.

## Own Funds – Objectives, Policies and Processes

Own funds are managed to ensure they are sufficient to cover the SCR within a wide range of circumstances and so that the Society is operating within its solvency risk appetite. This is set to maintain sufficient, but not excessive, financial strength, enabling new business growth while satisfying the requirements of regulators, Members and other stakeholders.

The Society maintains a capital management policy which includes a solvency ladder, showing how capital is to be managed at difference levels.

The Society has a management action plan which sets out actions that are planned if certain circumstances arise which would cause asset values to fall or liability values to rise and which would therefore affect own funds.

The Society monitors its own funds and other aspects of its capital through:

- tracking and estimating solvency regularly
- ORSA and other business projection to ensure that business plans remain appropriate
- monitoring new business levels, mix and profitability, and
- ensuring that the assets are invested appropriately.

## Own Funds – objectives

We manage our assets according to our investment policy. Broadly, this requires us to invest to ensure we can pay all Member benefits as they fall due, to invest in ways that meet Member expectations, to invest to meet all solvency requirements and, having met these criteria, to invest to maximise returns, subject to a level of acceptable volatility.

Given the strategy, we aim to invest to meet the Society's requirements for cash over the business plan period, bearing in mind the payments from Members that we expect to receive, the claims that we expect, the expenses we expect to incur and the new plans that we expect to go on risk.

We aim to generate a return on the assets held. We aim to be able to meet the benefits due to Members.

## Own Funds – Policies

**Investment policy** from time to time, the Board agrees the Society's investment policy. This describes the powers and limits of authority of the Society's selected investment managers. The Investment Committee makes sure that the Investment Policy is followed.

**ORSA policy** the regulator requires us to produce a policy setting out how we will run our ORSA.



# Capital Management



At least once a year, we run our ORSA process (see Section B.3). Part of this process is to allow the Board to assess the level of future Surplus Capital expected allowing for all sorts of different risks over time. The Board wants to be sure that it always has enough capital to pay Member benefits, and that it knows which risks could threaten this position.

The ORSA process includes testing of many different risks. It allows the Board to understand where there might be a problem and to draw up plans to deal with it. The plans will depend on the situation, but might include a change of strategy, re-pricing or re-designing our plans, or changing how we organise the business (usually so it runs at a lower cost). More dramatic action includes closing to new business or transferring the business to another firm.

## Own Funds – processes

At least twice every year, the Society reviews the performance of its investment managers to ensure that the investment policy is being followed and to assess performance.

## Material Changes

There have been no material changes to the Society's investment mix during 2021.

## Capital Tiers

The regulations classify capital in different tiers. All of the Society's Own Funds are Tier 1 (the highest quality tier of capital) and have always been Tier 1.

At 31 December 2021, our Tier 1 capital was £77.600m (2020: £59.807m). There are no restrictions on how we might use our Own Funds. They are fully available to cover the SCR and the MCR.

### What is the MCR?

The MCR, or Minimum Capital Requirement, is the threshold at which the regulator is allowed to take over the running of an insurer. It is much lower than the SCR (a quarter of the amount).

The level of Own Funds and of Surplus Capital has changed over the reporting period reflecting the progress of the strategy, the revised assumptions made in the valuation, the changes to the Management Action Plan, the investment in new business and the resulting movement in Technical Provisions and SCR as summarised in section D2 and E2.

## Required statements

The regulations require us to set out a number of points about our Own Funds. Specifically:

- there are no Own Fund items subject to a transitional arrangement
- under the rules, insurers are allowed to hold Ancillary Own Funds. Ancillary Own Funds count as capital, but are slightly less easy to get hold of. We don't have any Ancillary Own Funds, and
- there are no deductions from our Own Funds and no restrictions on their availability and transferability.



# Capital Management



## E.2 Solvency Capital Requirement and Minimum Capital Requirement

The following table summarises the Society's SCR and MCR:

	31 Dec 2021	31 Dec 2020
Market risk	11,374	12,076
Counterparty default risk	-	-
Health underwriting risk	41,126	36,869
Diversification across all risks	(7,172)	(7,379)
<b>Basic Solvency Capital Requirement</b>	<b>45,328</b>	<b>41,566</b>
Operational risk	430	417
<b>Solvency Capital Requirement</b>	<b>45,758</b>	<b>41,983</b>
<b>Minimum Capital Requirement</b>	<b>11,439</b>	<b>10,496</b>

The SCR has increased. It was calculated using the same assumptions as used in the Technical Provisions calculations.

We are satisfied with the result of the calculations to give the SCR and MCR. The regulator reserves the right to assess the result and ask us to amend it. If this happens, we will amend this document and describe the changes.

### Required statements

The regulations insist that we set out a number of points about our SCR and MCR. Specifically:

- there are no simplifications applied to the SCR calculation
- there are no undertaking-specific parameters used in the SCR calculation, and
- the MCR for the Society is 25% of the calculated SCR.

The MCR is calculated using a regulator-provided formula. The change in the MCR over the year follows the change in the SCR.

### E.3 Duration-based Equity Risk Sub-module in the Calculation of the SCR

The regulations allow the SCR to be calculated using something called the duration-based equity risk sub-module. We don't use this and have to state that this is the case.

### E.4 Differences between the Standard Formula and any Internal Model used

We calculate our SCR using the standard formula, as set out by the regulator.

Insurers are allowed to use an internal model, which is an approach that is tailored to the individual insurer. We judge that using such a model would not produce a better result for the Society and would be much more expensive than the approach we have taken, so we don't use an internal model.

The regulations require us to describe the differences between the standard formula and the internal model, but that does not apply to us.

### E.5 Non-compliance with the Minimum Capital Requirement and Non-compliance with the Solvency Capital Requirement

We complied with the rules regarding the maintenance of the SCR and the MCR continuously throughout 2021.

### E.6 Any Other Information

The pandemic is generating significant global economic disruption. We have considered the impacts of the pandemic in our assumptions for the valuation. Based on this work, it is our best estimate that the Society will continue to meet the SCR and MCR in this pandemic scenario. If the situation worsens, there could be an adverse impact on the Society. The situation is volatile and we will continue to assess the impact on the Society as things change.



# Summary of Explanatory Notes



The notes are not intended to be definitions, nor are they very technical. They have been provided to aid understanding. If you would like a technical definition or to understand more about the limits of the explanation, we would be happy to provide more details.

Term	Explanatory Note
<b>Actuary</b>	An actuary is a specialist insurance professional who is trained in actuarial work. Actuarial work tends to involve projecting events over the long term. Events include sickness, investment returns and expenses. Actuaries use these projections to confirm the financial health of insurers.
<b>Audit and Risk Committee</b>	The Board has set up Committees to help it with oversight. The Audit and Risk Committee oversees internal and independent audit, compliance, actuarial and risk management activities. It ensures that the risk management and internal control systems are effective.
<b>Board</b>	<p>Most companies are run by a Board of Directors. These are the people who direct the company, decide its strategy and ensure its governance. The Board oversees plans, performance and activity and, if not satisfied, makes changes.</p> <p>The Board is chosen by the owners of the company. For us, the Board is chosen by you, our Members, at the annual general meeting.</p>

Term	Explanatory Note
<b>Capital</b>	<p>Capital is the name for the resources available to meet the Society's outgoings.</p> <p>For the Society, capital is made up of cash, investments and the difference between expected payments (inflow) less current and future claims and expenses (both outflow).</p>
<b>Chair</b>	The Chair is the Non-Executive Director who leads the Board. It is an important role with specific responsibilities to the regulator and to Members.
<b>Executive</b>	The Executive refers to a small group of senior employees. At the end of 2021, the Executive comprised the Chief Executive, the Sales & Marketing Director, the Director of Operations and the Chief Financial Officer. These are the employees who run the Society, led by the Chief Executive, responsible to the Board.
<b>Experience</b>	Insurers make a lot of assumptions in their planning and projections. Experience is the term used to describe what actually happened rather than the assumption that was made.
<b>Independent auditor</b>	An independent auditor is a firm appointed mainly to provide independent assurance to Members that a Society's accounts are broadly accurate.
<b>Financial statements</b>	Financial statements are reports that we are required to produce by law setting out basic information about the Society's financial health. They are available on our website or on request, free of charge. They are sometimes referred to as the Report and Accounts.
<b>GBP</b>	Great British Pounds, the international code for pounds sterling



# Summary of Explanatory Notes



Term	Explanatory Note
<b>Governance</b>	Governance covers everything done to be sure that a business is running properly. It includes legal requirements, the need to be fair to Members, and the need to organise the business sensibly and with due regard for risk.
<b>Holloway products</b>	We understand that we were the first firm to combine income protection and savings. The resulting innovative product, introduced around 1875, was named after our founder, George Holloway, MP for Stroud.
<b>Lapse</b>	When a Member decides not to continue with their product, we say that it has 'lapsed'. Products may also end because the Member dies, the Member reaches retirement or the product reaches its maturity date.
<b>Liquidity</b>	Liquidity is the term used to describe how easy it is to get hold of cash when it is needed. Liquidity often changes when economic factor changes: for example, sometimes property is easy to sell, sometimes it is harder to sell, depending on interest rates, market activity etc..
<b>Liquidity risk</b>	Liquidity risk for us occurs when a benefit cannot be paid because we cannot physically get hold of the cash to pay. We take steps to make sure that the Society is not exposed to this risk.
<b>MCR</b>	The MCR, or Minimum Capital Requirement, is the threshold at which the regulator is allowed to take over the running of an insurer. It is much lower than the SCR (a quarter of the amount).

Term	Explanatory Note
<b>Operational risk</b>	Operational risk is the risk of some planned activity going wrong because a process fails, a system fails or someone does something wrong.  The regulator includes fraud and legal problems as operational risks.
<b>Own Risk and Solvency Assessment</b>	The regulations require insurers to undertake an Own Risk and Solvency Assessment, or ORSA, whenever its risks change, or at least annually.  The ORSA is a judgement by the Board of the insurer's risks and the impact on the insurer's solvency. Importantly, it is the Board's view, not the regulator's (and not the view using the regulatory formula).
<b>Own funds</b>	This is jargon for an insurer's total assets less liabilities, counted using the rules of Solvency II.
<b>Prudent Person Principle</b>	This is a phrase in the regulations. It means that investments should be only those that a prudent person would make.
<b>Reinsurance</b>	Reinsurance is insurance for insurance companies. An insurer can use reinsurance to reduce its own risk, to provide technical support and to help with cash flow. Reinsurance is provided by specialist firms called reinsurers.
<b>Risk register</b>	The Society's risk register is a list of the risks that we face with details of how the risks are identified, measured, monitored, managed and reported.



# Summary of Explanatory Notes



Term	Explanatory Note
<b>Risk tolerance</b>	Most measures of performance have an expected value or target. The risk is that the actual value is higher or lower than the target, to an extent that might cause harm or cause the business plan to be re-considered.
<b>Senior Leadership Team</b>	This is the group of people who work for members of the Executive. On a day-to-day basis, the Senior Leadership Team makes sure that the Society is properly run. Members of this team attend the monthly Executive, and some other, Committee meetings and, depending on their job, may occasionally attend or present at Board meetings.
	Regulators recognise that the more surplus money a firm has, the more secure the Member benefits. 'Solvency' is the jargon used by insurers to mean the surplus money that a firm has in excess of that needed to meet Member claims in most circumstances.
	Insurers talk about capital rather than money. Capital is defined a little later on.
<b>Solvency</b>	When considering a risk, insurers look at the impact the risk might have on their surplus capital - hence, the impact on solvency.  Generally, high or increasing solvency is a good thing for benefit security. Low or declining solvency is a concern, unless the change was planned or there is a good reason for it, for example if benefits are being improved.

Term	Explanatory Note
<b>Solvency II</b>	Solvency II is the name given to the regulation that UK insurers have to follow. It sets out what insurers have to do to protect policyholder benefits.  The areas discussed in this document are all required under Solvency II, as is the production of this document.
<b>Solvency Capital Requirement</b>	This is the amount that the regulator says the Society has to hold to ensure Member benefits are secure in most circumstances over one year. We calculate it using a formula provided by the regulator. It is often shortened to SCR.
<b>Surplus capital</b>	Surplus capital is the capital over and above that needed to meet expected Member benefits and the SCR.
<b>System of governance</b>	This means everything that is in place to make sure that the Society is well governed.
<b>Underwriting</b>	Underwriting is the insurance term for setting the prices to be paid for the benefits offered at the right level for the risks accepted. For us, this means agreeing prices for individual Members that are competitive as well as ensuring that we can meet the claims of all Members and cover the Society's administration costs
<b>Valuation</b>	Every year, we are required to calculate the value of the plans that we administer, primarily to make sure that we have enough capital to meet the benefits that are due to Members. This process is called the valuation.





We welcome and invite feedback from you, our Members and owners.  
You can contact us in a number of different ways, as follows:

**In person**, by attending the Annual General Meeting.

**By email**, using [hello@holloway.co.uk](mailto:hello@holloway.co.uk)

**By telephone**, on 0800 0931 535

**By letter**, by writing to Holloway Friendly, Holloway House,  
71 Eastgate Street, Gloucester, Gloucestershire, GL1 1PW

### What the future holds

All through 2021 we've been working on building new systems and developing new services that will help provide our Members with a better support and offer more people the opportunity to protect their income like you.

Into 2022 and beyond we will continue investing in new systems, training our colleagues and improving the service we offer so we can continue to always be there when you, our Members need us the most - and help keep life colourful.